| TRANSMITTAL FORM | Application Number | 10/690,068 |
|--|------------------------|------------------|
| (To be used for all correspondence after initial filing) | Filing Date | October 20, 2003 |
| | Inventor | K.W. BOYD et al. |
| | Group Art Unit | 2114 |
| | Examiner Name | Paul F. Contino |
| | Attorney Docket Number | TUC920030005US1 |

ENCLOSURES (check all that apply)

| ☐ Fee Transmittal Form | Assignment Papers | Certificate of Correction of |
|-----------------------------|------------------------------------|------------------------------------|
| Fee Attached | Drawings: Replacement | Applicant's Mistake (37 CFR 1.323) |
| ☐ Amendment/Reply | Sheets | Certificate of Correction of |
| ☐ Preliminary | ☐ Petition for Corrected Notice of | Office Mistake (37 CFR 1.322) |
| ☐ Supplemental | Recordation | ☐ Notice of Appeal |
| After Final | ☐ Petition for Corrected Filing | Pre-Appeal Brief Request for |
| □ Rule 312 | Receipt | Review |
| Extension of Time Request | ☐ Petition: | ☐ Appeal Brief |
| Express Abandonment Request | ☐ Change of Correspondence | ☐ Status Letter/ Status Request |
| ☐ Information Disclosure | Address | ✓ Issue Fee Transmittal Form |
| Statement: references | Power of Attorney | Fee Address Indication Form |
| Certified Copy of Priority | Statement Under 37 CFR 3.73(b) | Applicant Interview Summary |
| Documents | ☐ Terminal Disclaimer | Response to Notice of Non- |
| Response to Missing Parts/ | Comments on Statements of | Compliant Amendment |
| Incomplete Application | Reasons for Allowance | • |
| | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| Firm or Individual Name: | Rabindranath Dutta, Registration No. 51,010 |
|--|---|
| Signature: | Rebidel |
| Date: | April 15, 2008 |
| KONRAD RAYNES & VICTOR, LLP 315 South Beverly Dr., Suite 210 Beverly Hills, CA 90212 310-556-7983 | The Commissioner is hereby authorized to charge to Deposit Account No. 09-0449 any additional fee required under 37 CFR 1.16 and 1.17, including all required extension of time fees or any other deficiency, and credit any overpayment to this deposit account. |

CERTIFICATE OF TRANSMISSION

| I hereby certify that this correspondence is being transmitted through the USPTO EFS-Web system over the Internet on the date indicated below. | | | | |
|--|--------------------|--------------|--|--|
| Typed or Printed Name: | Rabindranath Dutta | Customer No. | | |
| Signature: | Rehabel | 46917 | | |
| Date: | April 15, 2008 | | | |